## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

NU-216

| CLAIMS AS FILED - PART I                 |   |   |                            |                                       |              | S                | MALL E   | NTITY             |                        | OTHER | R THAN              |                        |
|--|---|---|----------------------------|---------------------------------------|--------------|------------------|----------|-------------------|------------------------|-------|---------------------|------------------------|
|  |   |   | (Column 1)                 |                                       | (Column 2)   |                  |          | TYPE              |                        | OR    |                     | ENTITY                 |
| TOTAL CLAIMS                             |   |   | 43                         |                                       |              |                  |          | RATE              | FEE                    | 7     | RATE                | FEE                    |
| FOR                                      |   |   | NUMBER FILED               |                                       | NUMBER EXTRA |                  | E        | BASIC FEE         | 385.00                 | OR    | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS                  |   |   | 43 minus 20= 1             |                                       | • 23         |                  |          | X\$ 9=            | 20-                    | OR    | X\$18=              |                        |
| INDEPENDENT CLAIMS                       |   |   | Y minus 3 =  *             |                                       | ,            |                  |          | X43=              | 43                     | OR    | X86=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT         |   |   |                            |                                       |              |                  | +145=    |                   | OR                     | +290= |                     |                        |
| * 1:                                     | f the difference  | e in column 1 is                          | ero, enter "0" in column 2 |                                       |              |                  | TOTAL    | 635               | OR                     | TOTAL |                     |                        |
| CLAIMS AS AMENDED - PART II              |   |   |                            |                                       |              |                  |          |                   |                        |       | OTHER               | THAN                   |
| (Column 1) (Column 2) (Column 3)         |   |   |                            |                                       |              |                  |          | SMALL             | ENTITY                 | OR    | SMALL               |                        |
| AMENDMENT A                              |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                            | HIGHE<br>NUMB<br>PREVIO<br>PAID F     | ER<br>USLY   | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                      | **                                    |              | =                | .        | X\$ 9=            |                        | OR    | X\$18=              |                        |
| AME                                      | Independent   | rendent                                   |                            |                                       | CLAIM        | =                |          | X43=              |                        | OR    | X86=                |                        |
| THE SECTION OF MISERIFEE DEFENDENT COAIN |   |   |                            |                                       |              |                  |          | +145=             |                        | OR    | +290=               |                        |
| •  |   |   |                            |                                       |              |                  |          | TOTAL<br>DIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE |                        |
|  |   |   |                            |                                       | _            |                  |          |                   |                        |       |                     |                        |
| AMENDMENT B                              |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                            | HIGHE<br>NUMBI<br>PREVIOL<br>PAID F   | ER<br>JSLY   | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                      | ** .                                  |              | =                | ,        | X\$ 9=            |                        | OR    | X\$18=              |                        |
| ME                                       | Independent   | *   | Minus                      | ***                                   |              | =                |          | X43=              |                        |       | X86=                |                        |
| 1  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                            |                                       |              |                  |          |                   |                        | OR    | 7,00-               |                        |
| •  |   |   |                            |                                       |              |                  |          | 145=              |                        | OR    | +290=               |                        |
|  |   |   |                            |                                       |              |                  | ADI      | TOTAL<br>DIT. FEE | ·                      | OR ,  | TOTAL<br>ODIT. FEE  |                        |
|  |   | (Column 1)                                |                            | (Column                               |              | (Column 3)       |          |                   | . •                    |       |                     |                        |
| AMENDMENT C                              | `   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                            | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | R            | PRESENT<br>EXTRA | F        |                   | ADDI-<br>TONAL<br>FEE  |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                      | **                                    |              | =                | X        | (\$ 9=            |                        | OR    | X\$18=              |                        |
|  | Independent   | *   | Minus                      | ***                                   |              | =                | <b>5</b> | (43=              | -                      | . t   | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                            |                                       |              |                  |          |                   |                        | OR    | 700-                |                        |
| * If                                     | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |   |                            |                                       |              |                  |          |                   |                        | OR    | +290=               |                        |
| **                                       | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |   |                            |                                       |              |                  |          |                   |                        | ORA   | TOTAL<br>DDIT. FEE  |                        |
| Ť  | he *Highest Num   | ber Previously Paid                       | For (Total or              | Independent                           | ) is the h   | ighest number    | found i  | n the appro       | opriate box            |       |                     |                        |